

Commonwealth of Kentucky
REVENUE CABINET
Department of Property Valuation
Division of State Valuation
Frankfort, KY 40620

Property Assessed January 1, 1998

| FOR OFFICIAL USE ONLY | |
|--|----------------|
| County Code | Locator Number |
| T <u> </u> <u> </u> <u> </u> / <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> | |

This return must be filed with the PVA in the county of taxable situs or the Department of Property Valuation between January 1 and May 15.

| | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|---|---|---|--|---|
| Social Security No. or Federal ID No. | | | | | Name of Business | | | | Organization | | Type | | | | |
| | | | | | Name of Taxpayer(s) | | | | Telephone Number () | | <input type="checkbox"/> Individual | 1 | | | |
| 2nd SSN if joint return | | | | | Number and Street or Rural Route | | | | <input type="checkbox"/> Joint (Co-Owners) | | 2 | | | | |
| SIC CODE | | | | | City or Town | | | | State | | ZIP Code | | | | |
| Type of Business | | | | | Property Location (Number and Street or Rural Route, City) | | | | <input type="checkbox"/> Partnership | | 3 | | | | |
| Did you list tangible personal property in other KY counties? <div style="display: flex; justify-content: space-between;"> (check one) Yes No </div> | | | | | Property is Located in | | County | | | | <input type="checkbox"/> Domestic Corp. | | 4 | | |
| | | | | | Enterprise Zone | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | For Official Use Only | | | | <input type="checkbox"/> Foreign Corp. | | 5 |
| | | | | | If yes, attach certificate. | | | | District Code | | | | <input type="checkbox"/> Fiduciary—Bank | | 6 |
| | | | | | Type Return | | 15 15 | | <input type="checkbox"/> Fiduciary—Other | | 7 | | | | |

| FROM SCHEDULE A | | | | |
|--------------------|---|---------------|----------------------|---------------------|
| | Class | Original Cost | Reported Value | For Office Use Only |
| 11 | I | | | |
| 12 | II | | | |
| 13 | III | | | |
| 14 | IV | | | |
| 15 | V | | | |
| 16 | VI | | | |
| 17 | Total | | | |
| INVENTORIES | | | Taxpayer's Valuation | For Office Use Only |
| 31 | Merchants Inventory | | | |
| | Motor Vehicles Held for Sale (dealers only) | | | |
| 34 | New Farm Machinery Held Under a Floor Plan | | | |
| 35 | Goods Stored in Public Warehouse (see instructions, page 4) | | | |
| 36 | Goods Stored in Public Warehouse—in Transit/ Foreign Trade Zone | | | |
| 37 | Unmanufactured Tobacco Products not at Manufacturers Plant or in Hands of Grower or His Agent | | | |
| 38 | Other Unmanufactured Agricultural Products not at Manufacturers Plant or in Hands of Grower or His Agent | | | |
| 39 | Unmanufactured Agricultural Products at Manufacturers Plant or in Hands of Grower or His Agent/Industrial Revenue Bond Property | | | |
| 50 | Livestock and Farm Machinery | | | |
| 60 | Other Tangible Personalty (from Schedule D) (on reverse) | | | |
| | CONSTRUCTION WORK IN PROGRESS | | Taxpayer's Valuation | For Office Use Only |
| 82 | Other Tangible Property (fair cash value) | | | |
| 90 | Recycling Machinery and Equipment | | | |

SCHEDULE D

| Other Tangible Personalty Not Listed Elsewhere | | | | |
|--|------------------|-----------------------------|------------------|---------------------|
| | Description | | Taxpayer's Value | For Office Use Only |
| Materials and Supplies | | | | |
| Other Property | | | | |
| Coin Collections | | | | |
| Stamp Collections | | | | |
| Art Works | | | | |
| Other Collectibles | | | | |
| Research Libraries | | | | |
| Precious Metals | Number of Ounces | Value Per Ounce December 31 | | |
| Gold | | | | |
| Platinum | | | | |
| Silver | | | | |
| Other | | | | |
| Total (enter this figure on Line Item 60) | | | | |

| Comments | | |
|---|-------------|-----------------------------|
| Additional comments and/or information regarding alternative values may be provided by classification below: | | |
| Classification Type | | Comments/Information |
| | Schedule A | |
| | Inventories | |

I declare, under the penalties of perjury, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return; and that all my taxable property has been listed.

Name of Preparer Other Than Taxpayer

Signature of Taxpayer

Telephone Number of Preparer

Date

